



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 2248

|  |   |   |   |                                       |                                |
|--|---|---|---|---------------------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>09/845,329   | <b>FILING DATE</b><br>05/01/2001<br><b>RULE</b>   | <b>CLASS</b><br>370                       | <b>GROUP ART UNIT</b><br>2661   | <b>ATTORNEY DOCKET NO.</b><br>550-228 |                                |
| <b>APPLICANTS</b><br>Martin Martin San Juan, Cambridge, UNITED KINGDOM;<br><b>** CONTINUING DATA</b> ..... <i>None</i> ..... <i>hc</i> .....<br><b>** FOREIGN APPLICATIONS</b> ..... <i>Yes</i> ..... <i>hc</i> .....<br>UNITED KINGDOM 0017531.5 07/17/2000<br><b>IF REQUIRED, FOREIGN FILING LICENSE</b><br><b>GRANTED ** 06/25/2001</b> |   |   |   |                                       |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature _____ Initials _____        |   | <b>STATE OR COUNTRY</b><br>UNITED KINGDOM | <b>SHEETS DRAWING</b><br>4  | <b>TOTAL CLAIMS</b><br>11             | <b>INDEPENDENT CLAIMS</b><br>1 |
| <b>ADDRESS</b><br>NIXON & VANDERHYE P.C.<br>1100 North Glebe Road, 8th Floor<br>Arlington, VA 22201-4714   |   |   |   |                                       |                                |
| <b>TITLE</b><br>Data processing apparatus and slave interface mechanism for controlling access to a slave logic unit by a plurality of master logic units  |   |   |   |                                       |                                |
| <b>FILING FEE RECEIVED</b><br>710  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                       |                                |